

# Mental Health Parity Law The Basics

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When the Federal Mental Health Parity Law (MHPAEA or called "Muh-P-uh") became law it 2008 it only applied to certain large group health insurance plans. The Affordable Care Act expanded mental health parity to small group and individual health insurance coverage for plans that offer mental health benefits. If the Affordable Care Act were repealed or struck down in court, these protections would be lost.

MHPAEA does not require health plans to cover mental health treatment. It states that *if* a health plan offers mental health treatment coverage, it cannot impose "less favorable benefit limitations" on mental health benefit than those limits placed on medical or surgical benefits.

Limitations to benefits can take two forms – quantitative treatment limitations (QTL) and non-quantitative treatment limitations (NQTL). Quantitative treatment limits are based on numbers – such as copays, coinsurance, visit limits, dollar limits, age limits or caps on length of treatment (duration caps). Under MHPAEA, health plans cannot have these kinds of limits on mental health treatments if they do not have such limits on "substantially all" medical and surgical benefits in the same treatment category. Non-quantitative limits include medical review criteria, pre-authorization requirements, and provider network adequacy.

### What conditions are covered under Mental Health Parity Law?

The American Psychiatric Association's latest version of the Diagnostic and Statistical Manual of Mental Disorders (DSM) is the "cornerstone" of the mental health parity law. In general, conditions contained in this manual are covered unless excluded under state and federal law. Indiana mental health parity law includes autism. However, some states exclude autism from mental health parity laws. Intellectual and general developmental disabilities (IDD) are not typically covered as a stand-alone diagnosis for the purposes of mental health parity law. However, if a person has a co-occurring mental health condition with IDD, such as anxiety, depression, OCD, ADD or ADHD, it should be covered. It may violate state and federal law to refuse mental health treatment or coverage for a person based solely upon their IDD.

## What Plans are Covered Under Federal Law?

Between MHPAEA and the Affordable Care Act, most employer sponsored plans, individual health plans and ACA Marketplace Plans are required to follow mental health parity. There are exceptions, and some plans do not offer mental health benefits under their medical plan. For example, they may be offered under an Employee Assistance Program.

CHIP, Medicaid Benchmark Plans and Managed Care Plans that contract with the state to provide state Medicaid programs to provide services are required to comply with certain requirements under MHPAEA.

# How Do I Know if My Plan is Covered Under Federal Mental Health Parity Law?

Check with your health plan customer service and/or employer benefit's department to verify if your plan must comply with federal mental health parity.

## What Do I Do If I Think My Plan Is Not Following the Law?

- Verify that your plan must follow mental health parity
- Gather clinical documents to support your treatment from your provider(s)
- Gather documents about mental health parity to support your treatment (see resources below)
- Appeal any denials for pre-authorization or claims using the internal appeal process with the help of your providers
- If the denial is based upon medical necessity, you should be able to file an external appeal. This is an appeal where an outside company reviews your denial to see if it was clinically appropriate.
- If your plan is an ACA Marketplace Plan contact your state Department of Insurance for assistance

- If your plan is employer based contact the US Department of Labor for assistance and to speak to a benefits advisor
- For CHIP and Medicaid, contact the CMS help line at 877-267-2323 ext. 61565 or email <u>phig@cms.hhs.gov</u>

### Resources

Indiana Department of Insurance - 317-232-2385

<u>Ask Employee Benefits Security Administration</u> - 866-444-3272

Know Your Rights – Parity for Mental Health and Substance Use Disorders

CMS - Mental Health Parity and Addiction Equity Act Fact Sheet

<u>American Psychiatric Association - Health Insurance Coverage & Access</u> <u>to Care</u>

State Laws Mandating or Regulating Mental Health Benefits

Parity Tracker – Indiana Parity Law

Parity Tracker – Indiana Legislation Signed Into Law

Questions? Contact Michele Trivedi <u>mtrivedi@arcind.org</u> 317-977-2375 or 800-382-9100

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